

Section 1: Personal details

Job application form

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

Post applied for

Last Name

First Name

Address

Postcode

Mobile Number

National insurance
number

Home Number

Day Number

Email address

Are you free to remain and take up employment in the
UK with no current immigration restrictions?

Yes

No

If no, please give further details include
restrictions to the number of hours you
are able to work i.e. Student Visa, 20
hours.

Driving Licence – if relevant to post applied for.
Do you hold a full, clean driving licence valid in the UK?

Yes

No

Are you willing to drive company vehicles in line with
our insurance policy and company car procedures

Yes

No

If you are successful you will be required to provide relevant evidence of the above details prior to your appointment.

Section 2: Present employment

Present Employment (If you are currently unemployed please confirm your current situation i.e. registered with JobCentre Plus, Caring for relatives, raising family)

Name of employer

Address

Postcode

Post title

Date of
appointment

Salary

Department

Brief
description of
duties

Period of
notice

End date

Reason for
leaving

Name of employer			
Address			
	Postcode		
Start date		End date	
Position held			
Summary of duties			
Reason for leaving			

Name of employer			
Address			
	Postcode		
Start date		End date	
Position held			
Summary of duties			
Reason for leaving			

Section 3:
Previous
employment

Name of employer			
Address			
	Postcode		
Start date		End date	
Position held			
Summary of duties			
Reason for leaving			

Name of employer			
Address			
	Postcode		
Start date		End date	
Position held			
Summary of duties			
Reason for leaving			

Section 4:
Education

Qualifications obtained from Schools, Colleges and Universities. Please list highest qualification first:

University	Dates attended	Course	Qualifiactions and grades obtained

College	Dates attended	Course	Qualifiactions and grades obtained

School	Dates attended	Course	Qualifiactions and grades obtained

Section 4:
Education

e.g. CQSW, NVQ 4 RMA or LMC, RMNH, RMN, RGN, DMS, CMS, MBA

Please give details:

Professional/ Registered/ Management qualifications	Course Details

Section 5:
Training and
development

Please give details of any training and development courses or non-qualifications courses which support your application. Include any on the job training as well as formal courses.

Title of training programme or course	Duration of course and date completed

Section 6:
Personal
statement

Abilities, skills, knowledge and experience.
Please use this section to explain in detail how you meet the requirements of the Job Specification. If you are or have been involved in voluntary/unpaid activities, please also include this information. Attach and label any additional sheets used.

Abilities, skills, knowledge and experience

Section 7: Rehabilitation and offenders act (1974)

This post is offered subject to a satisfactory enhanced Disclosure and Barring Service (DBS) check. In the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action. Information given will be completely confidential.

If you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013, please give the details below.

Section 8: Protecting children and vulnerable adults

Enhanced Checks

Are you aware of any police enquires undertaken following allegations made against you, which may have a bearing on your suitability for this post?

Yes

No

Section 9: Interview arrangements

Do we need to make any specific arrangements for you to attend the interview?

Yes

No

If yes, please give details

Section 10:
References

Please give the names and addresses of your two most recent employers (if applicable). If you are unable to do this, please clearly outline who your references are.

Name	<input type="text"/>	Work relationship	<input type="text"/>
Organization	<input type="text"/>	Position (Job title)	<input type="text"/>
Address	<input type="text"/>		
	Postcode		<input type="text"/>
Email address	<input type="text"/>		
Mobile Number	<input type="text"/>		
Are you willing for this referee to be approached prior to the interview?		Yes	No

Name	<input type="text"/>	Work relationship	<input type="text"/>
Organization	<input type="text"/>	Position (Job title)	<input type="text"/>
Address	<input type="text"/>		
	Postcode		<input type="text"/>
Email address	<input type="text"/>		
Mobile Number	<input type="text"/>		
Are you willing for this referee to be approached prior to the interview?		Yes	No

Section 11: Declaration

A. Relatives/Other Interests

Any candidate who directly or indirectly canvasses an employee of the Company will be disqualified from consideration for the job. The Company does not bind itself to appoint any applicant.

Are you related to or do you have a close personal relationship with an employee(s) of **Wings healthcare recruitment limited**

Yes

No

If yes, specify name(s), position(s) and relationship(s)

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If appointed, do you have any interests or hold any appointments that may conflict with employment by the Company in the role for which you have applied? **If yes, please detail on a separate sheet.**

Yes

No

B. Statement to be Signed by the Applicant

The Company is committed to an anti-fraud culture and participates in statutory anti-fraud initiatives.

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I acknowledge that **Wings healthcare recruitment limited** is under a duty to protect the Service Users it supports and to this end I agree it may use information provided on this form for the prevention and detection of crime and it may share this information with other bodies solely for these purposes. I hereby give consent to such collection, storage and processing of my personal data and I agree that the information given on this form may be used for data registration purposes.

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered
- I possess all the qualifications which I claim to hold
- I have read and, if appointed, am prepared to accept the conditions set out in the conditions of employment and the job description.

Signed

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Date

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